Indian Policy Advisory Committee January 14, 2010

Present: See sign in sheet.

Jennifer LaPointe chaired the meeting in Liz Mueller's absence. Jim Sijohn provided the invocation. IPAC Delegates and those in the audience introduced themselves.

Jennifer introduced Andres Aguirre, Interim Director for the Division of Vocational Rehabilitation. Andres plans to continue to work with Tribes and enhance programs as much as possible.

<u>Health and Recovery Services Administration (HRSA)</u> Roger Gantz, Director

HRSA consulted with the Tribes in December to develop the new tribal-centric mental health delivery system. They wrote to CMS to notify them of the intent to submit a mental health waiver renewal. Over time they will amend the renewal so Native Americans and Alaska Natives will not receive their mental health services through the RSN system in the future. The first workgroup meeting was January 7. Roger said Tribal members want to convene a workgroup representing Tribes from eastern and western Washington, urban and rural areas. This would be a permanent workgroup.

HRSA is trying to identify funding for a person to staff the Tribal workgroup. Roger called it a unique opportunity for Washington to be national leaders in developing a system to use services the Tribes already have in place.

Roger discussed the issue of Tribal Designated Mental Health Professionals (DMHP), already in place. He discussed the need to strengthen protocols and gather data. Work has begun to research data analysis and background information, such as where people reside and what services they receive through the department. The next development meeting is February 4 at OB2 in SL-03 at 12:00-4:00 p.m.

HRSA submitted a Z-bill to develop the tribal-centric work system. Instead of going for separate legislation, they will revise proviso language.

Governor Gregoire submitted her supplemental budget in December. Her revised budget relies on additional revenue and contains restorations in critical areas. The two areas that affect HRSA include a commitment to restore a modified GA-U program. Nearly a thousand Native Americans and Alaska Natives currently receive GA-U or ADATSA. The other area will fully

fund Apple Health for Kids at 300% of the federal poverty level, which the initial budget had reduced to 200%. The revised budget will also restore dental, vision and other therapies. Some funding was restored to provide crisis outpatient health services to people not receiving Medicare.

Jessica Terry talked about Medicaid Administrative Match (MAM). She has been working with the Tribes and CMS the past five years to get approved cost allocation for MAM. She met with CMS last year about claiming methods and next steps. CMS provided a list of six options.

Jessica met with the Tribes to discuss the options, and then forwarded their comments back to CMS. She plans to meet with CMS on January 15 to discuss those options and have a deeper discussion on methods tribes thought would work. She will schedule a meeting with the Tribal MAM workgroup to discuss next steps. In the mean time Tribes are still being allowed to claim as they have been.

Jessica will provide the list of names for the CMS staff she is working with. Her primary goal is to make sure CMS understands Tribes are not school districts, which this plan was built around.

One Delegate expressed his discomfort that there is a history of less than respectful relations and there's now a meeting that excludes Tribes.

Jessica explained that this meeting is only for DSHS to "get a better grasp on where CMS sees this going" and make it clear that as long they view tribes as similar to the school program, it will not work. The Tribes will need to identify an agreeable methodology. The State will not make the decision for the Tribes and will continue to keep all tribes involved in the process.

Jennifer LaPointe asked to have staff from the Office of Indian Policy attend the meeting; Tracey Guerin assured her that would happen. (This meeting was subsequently cancelled.)

Roger assured the Delegates HRSA is committed to have a full active consultation with CMS on this issue when the time comes to make a decision. Tomorrow's meeting is a technical assistance meeting to understand their options and thinking. Deb Sosa explained HRSA had responded to CMS that they could not submit a proposal from the Tribes without clarification on the issues in question, and the meeting is also to get a better idea of their direction, given the changes at CMS.

Another Delegate pointed out the issue had already been referred to the Tribal MAM workgroup, which resulted in a deferral of any further action. He requested involving the Attorney General's Office (AGO) in the discussion, reminding the group that this had reached a heightened level of political and policy discussion.

Greg Twiddy reported on the tribal-centric mental health system. The group has discussed what works and what doesn't, and feels they have identified some areas that need addressed. Many mental health system users are from urban populations. They have also discussed the designated mental health provider. The group will meet again on February 4th.

The Division of Behavioral Health and Recovery (DBHR) has been working on a mental health specialist curriculum, which will include 100 hours of training. They have some proposed topics and hope to get good speakers. Greg asked for input on topics and presenters.

Gena Cruciani discussed ProviderOne, which will replace the Medicaid Management Information System, (MMIS). Claims processing is in place and operating in test mode. Gena encouraged all organizations to submit practice claims to make sure their systems are working properly. The claims process is very similar to the old one, so staff should be able to do it without training. Testing will continue through March.

Three big changes are coming that will affect the billing process:

- 1. National Provider Identifier must be used.
- 2. New client identifiers. The old PIC code was not private enough; the new ID is a randomly generated number.
- 3. Must use taxonomy code particular to service.

ProviderOne worked hard to get additional funding for this testing. They also have a support help desk. They can send trainers to the Tribes, but not at the last minute, so the Delegates were urged to schedule their training soon.

Everyone currently in ACES or MMIS has a new ID number. As new clients are added, they are assigned a new ID, but when ProviderOne goes live April 11, PIC numbers will go away.

Roger said tribal training will be provided at six locations, and they want to have the final training as close as possible to the go live date.

Hospitals and clinics are receiving training remotely through Webinars. They've had a good response from providers and it's less costly. Roger suggested providing a Webinar training followed by classroom training for the Tribes. Some Tribes could host other Tribes in their area, based on Webinar capability. Individual training would also be available.

Jennifer announced the formation of a committee working to transform mental health that would have members from IPAC, AIHC and NPAIHB. She asked IPAC to delegate five people to

work on that group. The group would meet monthly with subgroups working online and via conference calls. (See Resolutions section near end of these minutes)

Roll Call

Helen called the roll. A quorum was present.

<u>Juvenile Rehabilitation Administration (JRA)</u> John Clayton, Assistant Secretary

John has previously talked about continuum of care. Given the reduction in the number of youth in care, a study recommended combining two institutions. However, this is not the vision for JRA; instead, they plan to transform the system. JRA is a national leader, but the Administration needs to position for the future in trying to match the issue of security and serve more youth in the community. The Governor's budget supports the need for both a lock up and a step down process. This will increase the number of youth moving back to the community. By working to fill existing community centers and reopen some that have closed, JRA can provide a more normalized environment, school, and jobs for a more successful transition to living in the community. They will work with community groups who have an interest in the juvenile justice system and will not release any youth who are dangerous to the community or to themselves.

JRA has a funded project to work on a youth violence contract with community based organizations; one is the NATIVE project. Funds are going out the first of February.

John will visit tribes after the legislative session. He will add to those on his list Tribes that have intergovernmental agreements with JRA.

JRA has a grant with the MacArthur foundation and is working to develop a comprehensive plan to affect disproportionate minority contact. They are working to identify innovative approaches in working with courts and the community.

Bill Coleman announced Cabin Creek Counseling on Snoqualmie Pass will open soon. The facility was funded with donations from many Tribes and will provide counseling for young native men aged 13-18. Bill will provide information via the Office of Indian Policy (OIP).

The Healing Lodge of the Seven Nations at Spokane was started as the only treatment facility of its kind in Eastern Washington. Jim Sijohn will send information for John.

James Delacruz announced the Caregiver's Conference at Quinault Beach Resort February 10-12, 2010. It will target tribal elders, caregivers and providers. James said he is hoping to do some pilots here with Title III funding.

DSHS Budget

Gary Robinson, Interim Chief Fiscal Officer

Gary said the state had received lower revenue than expected. The result will be an overall reduction of about 5% across the department. Also since the number of clients has increased, there are caseload cost increases. Caseload forecasting will result in additional funding to cover those increases.

Governor Gregoire presented a budget in December that was balanced, but included severe cuts. Earlier this week she announced some restorations, including optional medical services provided through HRSA that are not mandated by the federal medical assistance program. We will continue to work with the Governor's office and the legislature with hopes that those restorations will be included in the final budget. The Department also hopes for some federal relief. We have been fortunate to receive some Recovery funds, and are in discussion with the Obama Administration and congress to have additional recovery funds available. Our economy is lagging, as it is across the nation and the current budget situation will continue into the next biennium. Gary will provide Colleen a summary of the restorations and reductions to forward to IPAC, and much of the information is available on the DSHS website.

The supplemental budget restoration is initially based on new revenue. It proposes closing a loophole associated with taxing out of state businesses conducting business in this state. Other areas of tax exemptions could be changed. The amount needed is just under \$800 million to restore identified programs. The Governor has also looked at transferring some balances from unused dedicated accounts to general funds to support governmental activities.

One Delegate asked if there is a chance the restorations would result from reductions in other areas; Gary said it was possible. The legislature, in working on their budget, could choose to reduce expenditure in another areas or change what Governor Gregoire has proposed.

One hopeful note is that the state tracks tax collections monthly and December's revenue was higher than projected. State revenue is very much dependent on income from sales.

The amount of potential federal revenue would come from the healthcare legislation, which could continue to bring the state a higher federal match. Also, congressional committees have considered additional education funds as high as \$200 million for this state. Both are potential and would be one time allocations.

Proposals for a state income tax have been discussed for years, but the Governor's budget does not name that as a potential revenue source. Gary is not aware of any discussion of Indian Gaming as a source of revenue.

A guest asked about weatherization dollars, saying it's a health issue. Gary is aware of federal weatherization funds being administered by the department of Commerce and will get that contact information to the Delegates.

CMS Consultation

Melodie Rothwell, CMS

Melodie discussed the Health and Human Services Consultation process. The Regional Director usually orchestrates regional consultations. Secretary Sibelius sent a letter to the Tribes about consultation. Now central office is planning consultations and has a generic agenda. This year's consultation will be about how to conduct a proper consultation. Dates are March 23 in Seattle or Portland, and March 25 in Anchorage. The Albuquerque consultation will be in April. Melodie will work with Colleen to get a contact list to share. Some discussion followed.

Melodie introduced Jack Granberg (<u>karen.granberg@adf.hhs.gov</u>, 206-615-2649), the new lead for Tribal TANF. Jack said there are some ARRA funds that haven't been applied for; she will provide technical assistance upon request.

Melodie also introduced Summer Puckett, who is on the child welfare team.

Aging and Disability Services Administration (ADSA) Subcommittee Report Jim Sijohn and Garnet Charles

Tribal Burial Funds Brief: There is an existing WAC that provides flexibility about a "reasonable amount" that must be in an irrevocable account for burial. Garnet suggested IPAC might want to send a letter to Tribal leaders asking if they want to set up accounts for Tribal burials, leaving the definition of what is reasonable up to them.

Garnet explained ADSA eligibility and financial workers were counting savings over \$1500 as a resource. The key is to place the savings in an irrevocable account. One Tribal member was able to open an irrevocable account with a funeral home when she couldn't find a bank that would handle that sort of account.

Any letter we send would be to inform Tribes that the resource needs to be set up as "irrevocable". Deb Sosa and a workgroup would draft the letter, which is not intended to tell tribes they have to set up account for each tribal member.

ADSA might be able to provide the educational information to Tribes on how to set up the irrevocable account.

The Washington Alliance for Healthy Aging wants a Tribal representative on their board. It would require monthly conference calls. (See resolution section near end of the minutes.) The Washington Alliance for Healthy Aging Annual Summit is scheduled September 24 at the Holiday Inn, SeaTac.

The Caregiver's Conference will be at Quinault Beach Resort Casino on February 10-12, 2010. Registration information will go to Tribal Leaders and IPAC Delegates soon.

The ADSA Subcommittee matrix lists one priority, which is "Tribal Codes, legal and fiscal assistance to help tribes develop, implement and maintain tribal elders codes". No one at the meeting could remember the origin of this priority, but the concern is that it's shown as a top priority and IPAC has no authority or funding to address it. The Delegates agreed to set the issue aside for now. Tulalip will share their elder code at the Caregiver's conference, solely in order to share information. There was discussion about inviting Tribal police, who enforce and helped develop the code at Tulalip. There was also discussion about elders who don't want to see their loved ones in jail, so don't press charges, and training TANF workers to address this with elders.

Children's Administration (CA)

Denise Revels Robinson, Assistant Secretary

Denise is in her eleventh week in Children's Administration. She introduced herself, as did the IPAC Delegates, and then briefly summarized her history. Growing up with foster siblings gave her experience with foster care. She promotes working with and honoring every member of the family and believes we need to work with community partners, as we cannot do the work alone.

Denise committed to communicate openly with the Tribes, work in partnership and address the needs of families and children, saying she welcomes feedback. She provided her work priorities, which are part of the plan formalized within CA, and shared her philosophy/vision to work statewide within CA. Her four themes include accountability, consistency, partnership and quality. Her priority areas are relatives/kinship care, racial disproportionality, ICW, federal Child and Family Service Review (CFSR), Braam settlement, redesign of behavioral rehabilitative services for adolescents, 2106, FamLink, foster parents, and professional development of supervisors.

FamLink will go live in March 2010. CA will work with tribes to evaluate capacity.

There was discussion about outcomes related to the work of the disproportionality committee. There are efforts to provide training on racism and effects of disproportionality for staff, but disproportionality increases related to decisions about children and placement permanency as children get farther into the system. Another question is whether the data collection system is good enough at identifying NA/AI children. Denise agreed that training is necessary, and that referrals accepted for investigation and decisions about placement are two over represented areas. Decisions between in home care and out of home placement are another area of disproportionality, as is the number of reports of child abuse and neglect of Indian children.

The legislature required CA to reduce the number of contracts and to implement performance based contracts. The contracted services fall in 4 areas:

- 1. Family based in home services
- 2. Services for children in out of home care
- 3. Adolescents with higher care needs
- 4. Older youth prep for independent living

All areas are important; the other part of process is to assess where gaps exist around the state for services, and to provide better services where they are needed to fill the gaps. Denise will not finalize those decisions without input from the Tribes.

Many Indian families are raising their family members. Jennifer asked Denise to explore permanence that doesn't include adoption. Removing birth parents from birth certificates is not a good idea when trying to retain ties between a child and the birth parents' tribes.

Denise thanked Jennifer for her feedback and said she's comfortable making kinship care a priority, recognizing that specifics related to Indian families are unique.

CA has not yet identified who will provide the child welfare supervisor training to ensure compliance with ICWA. This requirement will be implemented in April 2010. Tribes and RAIOs can participate in the training and should notify Nancy Dufraine of their interest. One Delegate said the Tribes can take better care of their own people better than anyone else, including their children. Denise said she appreciated that and hopes that requirements are clear and understandable within and outside of the department.

Cowlitz Tribe has worked to find out how many of their children are in the system. They requested referral data from the past three years, but the AGO recommended that field staff look

at only one year. The data covered referrals and services for the past twelve months, but did not include children in care whose referrals preceded that timeframe. The same request from Samish Nation resulted in different criteria. A consistent timeframe would help make more consistent responses to Tribal requests for information.

Denise said she was not aware CA had ever been told to limit the response to a certain time period; she will follow up.

Port Gamble S'Klallam Tribe enjoys a good IV-E reimbursement program and is grateful to work with good Children's staff, both in the region and at headquarters. The Tribe has asked to add family preservation into their agreement, but heard no response. Denise will follow up with Marilyn Olson.

Training for Regional Administrators will be at headquarters, rather than in the Regions. Two delegates agreed it would be helpful to send Tribal staff to the trainings to address ongoing issues.

Economic Services (ESA)/Vocational Rehabilitation (DVR) Subcommittee Report Jennifer LaPointe and Sarah Colleen Sotomish

In December 2009, the Department sent a letter to Tribal Chairs requesting Consultation on the State maintenance of effort (MOE) funding provided to Tribal TANF programs, and scheduling two roundtable meetings, January 28 and February 18, in advance of the Consultation. The Consultation has been scheduled for March 18.

Last year ESA informed the Tribes about the reduction in the allotment for Tribal TANF and plans to develop new guidelines for awarding Unique Needs MOE funding (UN). ESA initially wanted to focus solely on redistributing UN funding. However, given the reduced MOE funding available due to the state budget situation and the possibility of additional Tribes starting TANF programs, the current funding model may no longer be sustainable. ESA is asking for assistance from the Tribes to evaluate the current model and the need for a new distribution approach. ESA will send a reminder of the upcoming roundtable and consultation meetings to Tribal Chairs and delegates that will include some funding options identified by ESA for discussion at the roundtable meetings. ESA encourages Tribes to submit preferred funding options to Sarah Colleen Sotomish or Colleen F. Cawston.

The Tribal TANF WAC Development workgroup is nearing completion. Roundtable meetings to review the final draft WACs were held on November 12 and January 6. The Consultation will be held after the March 18 Consultation on State MOE funding for Tribal TANF programs; the date will be announced.

The ESA/DVR Subcommittee will hold its 2010 meetings in the Capitol View 1 building in Olympia February 4, May 6, August 5 and November 4.

The Office of Financial Recovery (OFR) will merge with the Division of Child Support (DCS) by early July. As an integrated organization, they can leverage the best practices of each program to make the most of limited resources and allow the department to attain economies of scale in payment processing. OFR has eighty staff who recover overpayments to vendors, other providers and employees, medical reimbursements, court-ordered judgments and certain medical premiums. This merger is a "welcoming home" because in the early 1990's, OFR and DCS together comprised the "Revenue Division."

As part of a "DCS of the Future" Initiative, DCS is centralizing its case setup and referral processing at DCS Headquarters Central Services. With regards to the processing of tribal referrals, a "Tribal Case Set-Up Subgroup" was formed to make recommendations on:

- Who (field offices or central services) should set-up referrals from Tribal TANF and Tribal Child Support programs, and
- Ensuring that 'referrals with tribal connections' from other sources are properly identified and assigned by Central Services.

Quinault, Port Gamble S'Klallam, Colville, Tulalip, and Upper Skagit participated in the workgroup. The subgroup met seven times in October through December and is in the process of finalizing their recommendations to present to the steering committee on January 19, 2010.

The Port Gamble S'Klallam Tribe's eligibility project is complete and cases have been referred. It's moving smoothly and the Tribe and state are working closely together to coordinate things.

Roxie Schalliol discussed the Washington State Benefit Portal Partnership Project. Packets included a one-page overview of the project. The portal will increase access to a wide variety of benefits for low-income families and will be available throughout the community in libraries, community-based organizations, state and local government agencies, and other public places including Tribal locations. The intent is to collect information one time that can be used to help determine potential eligibility or complete applications for benefits. Roxie asked for two tribal representatives for the project steering committee (see Resolution at end of minutes). Focus groups are meeting to gather input on the requirements for the portal. ESA is also working with other state agencies and programs, such as the Department of Health and the WIC program. They are developing an RFP to look at the best option for Washington State, hoping to issue it by March 1 and identify a vendor by June 1, with the first phase implemented by the end of 2010.

Jennifer recognized Troy for coming to the Puyallup Tribe to discuss potential improvement in the capability of ESA's Online Services Access that's currently linked through their existing kiosks. Contact Alice Liou at 360-725-4676 or <u>LiouAH@dshs.wa.gov</u> or Roxie at 360-725-4558 or <u>SchalRH@dshs.wa.gov</u> for questions.

Susan Dreyfus, Secretary

Susan thanked the Delegates for their Tribes' kind invitations as she and Colleen continue to visit the Tribes, and are continuing to learn so much about them. Susan's observations as she has traveled and visited include:

- 1. Tribal members are Washington State residents as well, so we share a responsibility for them.
- 2. Tribal Nations are critical assets to the State.
- 3. We have a partnership and need to work creatively together to leverage every available federal dollar to use for the Tribes.
- 4. Susan realizes the Tribes routinely model the person centered health home.
- 5. She understands why ICWA is so important and thanked Rebecca for her leadership, attitude and persistence.

She thanked the Delegates for their leadership and hopes DSHS and IPAC can continue to move toward a very strategic agenda to accomplish goals that are real, meaningful and measureable.

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Delegate Committee Reports

Rebecca reported the Transformation Design Committee is working toward performance based contracting. There are many questions and few answers. The committee meets quarterly and has subgroups, the twenty four member committee includes four Tribal members. The majority of the committee members know nothing about ICW. Current thought is that there will be master contractors around the state who will subcontract; giving CA fifty master contracts to supervise.

There was an issue paper about ICW, ICWA and government to government work, which has now expanded to include more education for nontribal members about major issues. CA doesn't know how they will address ICW, ILS, etc.; they may request a waiver for tribes.

We don't know how master contracting will impact ICW and tribal contracts or family preservation and other funding. Tribes might be able to be Master Contractors. All meetings are public and comments are welcome. The website is www.accountabilityinchildwelfare.org.

Lisa Rey Thomas from the Alcohol and Drug Abuse Institute (ADAI) at the University of Washington has worked with Colleen to plan the April 6 & 7, 2010 Tribal Communities Transforming Mental Health follow up conference. The reintegration of mental health services into the tribal system will be the major theme for this policy oriented conference. Colleen is trying to arrange a joint IPAC meeting with AIHC at the end of the conference. The venue will be selected soon. Lisa stated that she is working with the National Congress of American Indians to try to offer the training that NCAI has developed: Research That Benefits Native People: A Guide for Tribal Leaders.

Lisa thanked IPAC and those who attended the first conference. She received positive feedback from the first conference and will provide a preliminary report at the next IPAC.

General Terms and Conditions are used to eliminate redundancy in individual contracts. The last time DSHS reviewed it was lengthy process. The document is due for resigning in 2011. Colleen will send Delegates the current language. The next version will last six years, aligned with the biennium. Review of the document will be on the April IPAC agenda.

The legislative day for Tribes might be February 11, during the Caregivers' conference.

Northwest Indian College (NWIC)

Susan Given Seymour

Susan runs the Cooperative Extension for continuing education and training at NWIC. She wanted to discuss the college's Chemical Dependency Counseling Program. Fewer people are

going into the career, so fewer people are taking the classes. Jennifer recommended offering web based classes. Tribal College funding is only available to members of Federally Recognized Tribes.

Susan asked if there were any groups of native chemical dependency providers. One suggestion was to train non natives to provide chemical dependency services to natives, reaching out to CDPs and CDPTs looking for practicum opportunities. Other suggestions were to recruit at Tribal clinics, counties, contracted programs, AA groups, Tribal TANFs, health fairs and wellness programs.

Resolutions

2010-01

The federal <u>Child Family Case Review</u> needs four delegates, two from eastern Washington and two from the west, to work on assessment and planning groups for the statewide assessment. Jim Sherrill moved to appoint these four, Helen seconded and the motion passed.

Liz Mueller

Rebecca Peck

Cheryl Miller

Matilda Sampson

2010-02

The <u>ESA Benefits Portal</u> committee needs two members, one for Administrative and one for technical assistance. Rebecca Peck moved to appoint Jennifer LaPointe to the administrative position, and Joe Ruiz for technical; Helen Fenrich seconded and the motion passed.

2010-03

Jim Sherrill's term on the <u>Legislative Commission to Study Disproportionality in AI/AN</u>
<u>Children in care</u> has expired. Helen Fenrich moved, Jim Sijohn seconded that Jim serve another term. The motion carried.

2010-04

Jim Sijohn nominated Matilda Sampson to serve on the <u>Washington Alliance for Healthy Aging Committee</u>, which involves a monthly phone meeting. John Stephens seconded and the motion carried.

2010-05

Helen Fenrich moved and Cheryl Miller seconded that the following be appointed to the <u>mental</u> <u>health workgroup</u> to work with health commission and NPAIHB delegates. The motion passed.

Helen Fenrich, John Stevens, Kimberly Miller, Jennifer LaPointe, and Bob Brisbois were appointed.

Data

Liz Kohlenberg, Director, Research and Data Analysis

Liz distributed and briefly discussed a set of indicators of DSHS client health and employment, by region and statewide, showing disproportionality in needs and outcomes by race and ethnicity. She would like to partner with IPAC to find out if similar reports like this would be useful on a regular basis, and if so what additional indicators should be provided. She requested volunteers with policy interest in how the data would be used to help come up with a good list of indicators. It could require as few as two phone meetings.

Liz said it would be possible for RDA to run reports like this specific to tribes and urban Indian organizations. If there is a need for that scale, RDA would need enrollment or client lists which could be matched to the DSHS data. Interested tribes and organizations could contact Liz directly or through Colleen to discuss their information needs.

Rebecca Peck and Ed Fox volunteered; Rebecca also volunteered Joe Ruiz.

Ed asked if Liz was willing work with some programs at Squaxin Island, to which Liz agreed.

Jim Sijohn closed the meeting with a prayer.